

## Iowa Department of Corrections Victim Offender Dialogue Program (VOD)

### PARTICIPATION CONSENT FORM

Victim Offender Dialogue (VOD) in cases involving criminal behavior is a voluntary process that allows a crime victim to meet with the person who victimized them, or a loved one, in a safe setting with a trained facilitator. The purpose of this encounter is to allow both parties to talk about the crime, receive answers to questions, and to express their feelings and concerns related to the crime.

While there are often emotional benefits for one or both parties in such encounters, VOD is not a form of psychotherapy. Parties should also seek assistance from counselors, therapists and/or therapy groups if available. Parties are offered the option of having a support person in the preparation and/or Dialogue session, although this is not required.

The role of the facilitator is to provide a safe and structured format for the victim and the person who harmed them to engage in Dialogue. This includes providing an opportunity for the parties to talk directly to each other; allowing victims to express the full impact of the crime upon their lives and receive answers to important questions they have; and allowing the incarcerated person to hear about the real impact of their behavior and take responsibility to make things right.

The potential benefits of VOD include: having an opportunity to participate in the process of resolving the incident, express the short and long-term impacts of the crime, have questions answered, and to experience a greater sense of healing. There are, however, potential risks. These include: bringing up painful feelings from the past, possible resurgence of trauma symptoms, and being unrealistic about what the VOD process can accomplish.

This Participant Consent Form verifies that you understand what the VOD process consists of, including preparation and follow-up phases, and that you understand a support person may be present with you during VOD sessions. This also verifies that you and the facilitator have discussed potential benefits and risks of participating in VOD, and that you voluntarily choose to participate. By signing below, you also verify your understanding that the IDOC cannot guarantee confidentiality and agree to the use of online virtual meeting programs if needed/preferred.

If Participant is a Minor, both the Minor and the Minor's Legal Guardian/Parent must sign this document indicating they understand and agree with all stipulations in this Consent Form.

_____ Minor Participant - PRINT	_____ Signature	_____ Date
_____ Parent/Legal Guardian -PRINT	_____ Signature	_____ Date
_____ VOD Facilitator – PRINT	_____ Signature	_____ Date